

7012 3460 0001 9232 6516



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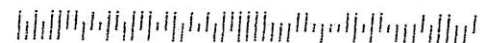
From: The Office of the Clerk  
United States District Court, N.D. Ohio  
Carl B. Stokes U.S. Court House  
801 West Superior Avenue  
Cleveland, Ohio 44113

To: Robert Rogers  
572 John Ross Parkway, Suite 10  
Rock Hill, SC 29730



RETURN  
TO SENDER

- ☐ UNDELIVERABLE AS ADDRESSED
- ☒ ATTEMPTED NOT KNOWN
- ☐ INSUFFICIENT ADDRESS
- ☐ NO MAIL RECEPTACLE
- ☐ TEMPORARILY AWAY
- ☐ NO SUCH NUMBER ☐ REFUSED
- ☐ NO SUCH STREET ☐ VACANT
- ☐ IN DISPUTE ☐ ILLEGIBLE
- ☐ BOX CLOSED ☐ UNCLAIMED
- ☐ MLNA - UNABLE TO FORWARD



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SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b></p>	
<p>1. Article Addressed to:</p> <p>Robert Rogers 522 John Ross Parkway Suite 107 Rock Hill, SC 29730</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7012 3460 0001 9232 6516</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	